

HEALTH OF FAT PEOPLE:THE SCARE STORY YOUR DOCTOR **WON'T** TELL YOU

By

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If you are fat, you probably worry a lot about your health. You have heard many doctors and medical associations claim that there is a significant connection between fatness and early death from diseases such as heart disease, diabetes, kidney failure, and the like. You have also probably tried many times to lose the weight that makes you fat, and have probably failed as many times. Each failure has probably brought you closer to despair. You fear death and illness, you suffer social rejection and shame, and you wonder what is wrong with you that you can't seem to lose weight even to save your life!

Yet it is no secret that many fat people are as healthy and long-lived as slim people--and suffer from none of the diseases supposedly contributed to by fat. Once in awhile a doctor or medical association makes a public statement that fat is not necessarily the killer it is claimed to be. These statements flash across the pages of newspapers as items to marvel at, then are quickly forgotten. Fat people .go on fearing for their futures.

Healthy fat people are not exceptional. The many studies "proving" that fat contributes to early death have been faulted time and time again by medical specialists such as Dr. Ancel Keys, who first pointed out that a widely-quoted 1948 study of heart disease was statistically invalid: not the fatter people in the study, but the older people, were relatively more prone to heart disease. Within any age group, heart disease ranged across fat and thin alike.

Criticism of studies produced follow-up studies. A 1966 United States Public Health Service report on obesity summarized the present state of information by writing that there is no justification for the conclusion that obesity contributes to increased mortality.

(continued)

FAT IS HEALTHY

What are the studies disputing the belief that being fat will kill you? The most famous of them is one of the fat Italian Americans of Roseto, Pennsylvania, studied in the 1960's, by medical teams from the University of Oklahoma. These people should have been a mortician's delight. They ate high cholesterol foods and many of them were very fat. These Rosetans held tastes and opinions different from those people of the surrounding main-stream American culture: they thought that being fat was just great. The researchers found them to be virtually free of the diseases supposedly brought on by fatness. In fact, they were healthier than the average, average-sized American of the same age, sex and occupation!

The remarkable good health of the Rosetans had little to do with "the luck o' the Italian." It came more from their sense of self-acceptance and peace. For, when Rosetans left their community to adopt the way of life of mainstream America, including its dislike of fat, they quickly became as sick as the fat people in the Heart Association warnings.

Roseto was not the only place where the connection between fat and illness was disputed. A 1952 Mayo Clinic study found that fat people who stay fat actually have a better chance of surviving a coronary than slim people or fat people who try to reduce. During the early 1950's, a series of studies in Boston, Nashville, and Minneapolis showed the same range and distribution of fat and thin people among coronary patients as among people not suffering from coronary heart disease. Similar findings were reported by Helen and C. Wesley Dupertuis of Western Reserve University in Outlook, summer 1967. In follow-up studies these researchers found that at least 25% of the long-time survivors had reached their greatest weight since the original attack, and were still surviving.

(It is puzzling that such studies are repeated every few years, always with the same results, yet they never seem to make a lasting impression on medical practice. Doctors still insist that fat patients must lose weight to avoid coronaries. Insurance companies still refuse to sell fat people policies on the grounds that they are more prone to disease and early death.)

A PAINFUL TRIP TO THE DOCTOR'S

Where do all the statistics that we read about, linking fatness with early mortality, come from? They are certainly "real" -- --that is, the studies exist, the results were published and can be read in many medical journals and newspapers. Yet part of valid statistics is valid sampling. In other words, the people who are studied must be typical of the people you want to apply your conclusions to. If doctors only observed people who came to them for

medical help, they might conclude that to be human is to be sick. Frequently, sick fat people are the only ones that doctors see; therefore doctors get the mistaken impression that all fat people are sickly. There are several reasons why doctors see relatively few healthy fat people.

If you are fat, you know how discouraging a trip to the doctor can be. The doctor tells you that you must lose weight, and gives you a printed diet--no matter what you came to see the doctor for. Diets are hard to follow, and you don't look forward to being hungry for the next year. Besides, you've tried to diet many times before, and even when you succeeded at losing weight, you gained it back, and more. Many fat people just don't go to the doctor until they have no choice--until they are too sick not to.

Fat people who visit doctors regularly accept the diets and try, year after year, unsuccessfully, to reduce. After so many failures, even the fat Buddha would be demoralized! The most consistent theme revealed in studies of the health of fat people is that those who like themselves tend to be healthy; those who cannot stand the way they are, who are demoralized, who live for losing weight, gaining it back and trying to lose it again, live lives that are sad and relatively shorter.

While the failure of dieting is hard on a person's self-esteem, starvation of dieting causes severe physical damage. Dr. Ancel Keys suggests that starvation impairs the heart. Dr. Hilde Bruch warns of the extreme damage done to nerve and other protein tissue by low-calorie diets. Dr. Sami Hashim and Dr. Theodore van Itallie, of the Institute of Nutrition Sciences at Columbia University, warn that the popular high fat, low carbohydrate diets play havoc with the dieter's body chemistry. The American Medical Association repeated this warning with their critical attack upon the popular Atkins diet. At the time of this writing, Dr. Atkins himself is being sued by an individual who followed the diet all the way to a heart attack.

Therefore, another reason why doctors rarely see healthy fat people is because doctors prescribe diets which make fat people sick. We cannot ignore or escape from this conclusion.

THE BASIC CONTRADICTION

Regarding fat and health, we clearly have two contradictory opinions, both supported by information. One opinion is that fat causes diseases which can be prevented by weight loss. The other opinion is that fat itself is healthy, but that weight loss is dangerous. Which information will you believe? Which information is it in your best interests to believe?

When doctors tell fat people that they must reduce or risk death, they strike fear into their patient's heart. Yet doctors cannot make fat people reduce--fat people must try to reduce themselves. Their failure (and there are almost no successes) is rated as their own failure, not the doctor's. The doctor who really cares about her patients may feel frustration and sorrow at a patient's failure to reduce, but the serious loss--in all the important senses of the word--is the patient's.

Why, then, do doctors continue to prescribe reducing diets to fat people?

Money, unfortunately, is one reason why.

Weight loss is a great business, a multi-billion dollar business, from which the medical profession takes its share. For every doctor who prescribes a reducing diet out of good intentions there is another whose intentions are simply to make money. Diet after diet fails. The fault is always laid to lack of will-power. The fat person comes back for another diet, another package of pills, another quick lecture on self-control and the evils of fat. Again--in all important senses of the word--it is the fat person who loses.

Ignorance and prejudice are surely reasons why doctors continue to insist that fat people reduce. Ignorance keeps from people the information they need to understand situations. Prejudice blinds people to logic. Doctors, no matter how well-intentioned, share many of the prejudices of the society they live in. A lifetime of study cannot help them if what they study (and what they don't study) reflects these prejudices.

The best-meaning, best-informed doctors may prescribe diets because there seem to be no other alternatives. Fat people are often wretched in a society that hates fat. Weight-reducing diets are not total failures--there is a miniscule fraction, less than one percent, who succeed at losing weight and keeping it off for more than five years. A well-meaning doctor might give his fat patient a diet, hoping against hope that this diet will succeed.

HOW TO TAKE CARE OF YOURSELF

If you have tried over and over to lose weight, and have gained it back every time, what can you do? Try again? Or stop trying? If you decide to stop trying, you may run into opposition from your doctor. You might try telling your doctor that your body size is your own business: the doctor is employed by you to treat you within the limits of what you decide to allow. Perhaps you could discuss the feasibility of weight loss, and whether it

makes any sense to keep on trying what you have already failed at many times before, especially considering how unsafe it is to try to reduce.

If your doctor tells you that reducing diets are perfectly safe, get another doctor.

If your doctor tells you that reducing diets are unsafe, but fat is even less safe, you might try to discuss with him or her some of the issues raised in this paper. Such a discussion might have some of the aspects of a black slave trying to convince a white plantation owner that black people really aren't all best off picking cotton. Again, you might do best to look for another doctor.

If you are fat, had your blood pressure measured, recently, and it was high, ask to have it checked again. This time, be sure that whoever measures it makes a correction for the tightness of the arm-band. Frequently, fat people get false high blood pressure readings because the arm bands designed for smaller people are too tight on fat arms. If the corrected reading is still high, consider seriously whether putting yourself through the hunger and strain of a reducing diet is going to lower it...and whether any weight you lose will stay off (based on past experience both personal and statistical). There are other ways to lower high blood pressure besides losing weight, a way which sometimes raises blood pressure.

The medical profession has generally not examined its position toward fat. Until it does so, fat people will find little in the way of good medical care.

CHANGING--WHAT, WHO AND HOW?

The viewpoint of this paper is that fat is not unhealthy; that fat people suffer enormously from the prejudice against fat. Can a person who is fat and who feels bad about it learn to feel good? Many fat people believe that they would really feel better if they were slim. Often these people live life from the sidelines, wishing that they could be out meeting people or doing exciting things, but not daring to act on their wishes because of embarrassment or fear of rejection. This fear is well-founded; fat people often are rejected. Does a fat person who believes that she would feel better if she were slim really mean, "I would feel better if I didn't think I was ugly and unlovable"?

I hope that fat people who feel that reducing is the only solution for them will think about the alternatives carefully. It's not that I attach any special value to being fat. Rather, getting slim and staying slim is such a risky, hard-to-reach goal for one who is fat. Muscular and lung capacity can be built up by rea-

sonable exercise, if that is what a person wants to do. There are slim people who feel winded after climbing one flight of stairs, and there are fat people who do the heaviest manual labor as part of an ordinary day's work. There are fat people whose lives are rich with fun, friends, love and sex. It's the stereotype, not any particular individual's body size, that needs changing.

Fat is not a health hazard. This is as true for the person who weighs six hundred pounds as for the person who would like to weigh twenty pounds less than she does. However outrageous such a claim may seem, it is based on practical logic. Is it any healthier to starve off six hundred pounds than to starve off twenty pounds? Is it any easier? Are not hunger and self-hatred unsafe at any size?

In former times, Malaya was ruled by kings of enormous size. They weighed five or six hundred pounds, and they lived well over seventy years. Perhaps it was the special massages and exercises they had that kept them healthy. Perhaps it was their pride.

Obviously modern medicine could learn something from the ancient Malaysians.

The health problems of fat people resemble the problems of other oppressed minorities. A recent article in Ebony reported that, in the United States, the rate of hypertension is many times higher for black people than for white. The same has been found for Puerto Ricans and Chicanos...and of course fat people. Can one predict that the same will be found for other oppressed people? The common problem seems to be stress, unhappiness and a sense of being "sick-at-heart".

Not that fat is a health problem, but that health is a social problem. We cannot treat people like ciphers, who must all fit the same mold or be damned. This social problem cries out for a humane solution.

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